

UNITED STATES DISTRICT COURT

for the MIDDLE

District of Tennessee

Division COLUMBIA

Case No.

1:25-cv-0041 (Kc)  
(to be filled in by the Clerk's Office)

JAYSEPH RYAN GUNN #475851

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

CORE CIVIC

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

RECEIVED

JUN 05 2025

US DISTRICT COURT  
MID DIST TENN

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

# DEFENDANT(S)

- 2) ASHLEIGH VANDYKE (SCCF)
- 3) GRADY PERRY (SCCF)
- 4) HELAN MOON (SCCF)
- 5) MELISSA STRANN (SCCF)
- 6) TENNESSEE Dept. of CORRECTION
- 7) FRANK STRADA (TDOC)
- 8) BENJAMIN F BEAN (TDOC)
- 9) ROBERT TURMAN TDOC

**I. The Parties to This Complaint****A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

JAYSEPH RYAN GUNN #475851

All other names by which  
you have been known:

JAYSEPH RYAN BELLAMY-GUNN

ID Number

#475851

Current Institution

SOUTH CENTRAL CORRECTIONAL FACILITY

Address

(SCCF) 555 FORREST AVE.

CLIFTON

TENN

38425

City

State

Zip Code

**B. The Defendant(s)**

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s) listed below are identical to those contained in the above caption. For an individual defendant, include the person's job or title (*if known*) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

## Defendant No. 1

Name

CORE CIVIC

Job or Title (*if known*)

PRIVATE MANAGED COMPANY FOR TDOC

Shield Number

N/A

Employer

CORE CIVIC

Address

5501 VIRGINIA WAY SUITE 110

BREATHWOOD

TENN

37027

City

State

Zip Code

☐ Individual capacity☒ Official capacity

## Defendant No. 2

Name

TENNESSEE DEPT. OF CORRECTION

Job or Title (*if known*)

↓

Shield Number

N/A

Employer

↓

Address

320 SIX AVE N. 6<sup>TH</sup> FL RACHEL JACKSON BLDG.

NASHVILLE

TENN

37243

City

State

Zip Code

☐ Individual capacity☒ Official capacity

## Defendant No. 3

Name

ASHLEIGH VANDYKE

Job or Title (if known)

ASSISTANT CHIEF OF SECURITY

Shield Number

N/A

Employer

(CCA) SOUTH CENTRAL CORRECTIONAL FACILITY

Address

555 Forrest Ave.

Clifton

City

TENN

State

38425

Zip Code

☒ Individual capacity☒ Official capacity

## Defendant No. 4

Name

GRADY PERRY

Job or Title (if known)

WARDEN

Shield Number

N/A

Employer

(CCA) SOUTH CENTRAL CORRECTIONAL FACILITY

Address

555 FORREST AVE

Clifton

City

TENN

State

38425

Zip Code

☒ Individual capacity☒ Official capacity

## II. Basis for Jurisdiction

Under 42 U.S.C. § 1983, you may sue state or local officials for the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” Under *Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics*, 403 U.S. 388 (1971), you may sue federal officials for the violation of certain constitutional rights.

A. Are you bringing suit against (check all that apply):

☐ Federal officials (a *Bivens* claim)

☒ State or local officials (a § 1983 claim)

B. Section 1983 allows claims alleging the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials?

TCA. 39-16-402 AND TCA. 39-16-403

TITLE VI, 14<sup>TH</sup> AMENDMENT RIGHT, CORE-CIVIL / TDOC POLICIES

C. Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional rights. If you are suing under *Bivens*, what constitutional right(s) do you claim is/are being violated by federal officials?

DEFENDANT NO. 5

NAME HELAN MOON  
JOB OR TITLE ASSISTANT WARDEN OF TREATMENT  
SHIELD NUMBER N/A  
Employer (CCA) SOUTH CENTRAL CORRECTIONAL FACILITY  
Address 555 FORREST AVE  
CLIFTON TENN 38425  
CITY STATE ZIP CODE

☒ INDIVIDUAL CAPACITY ☒ OFFICIAL CAPACITY

DEFENDANT NO. 6

NAME MELISSA STRAWN  
JOB OR TITLE S/O GRIEVANCE CHAIR PERSON  
SHIELD NUMBER 14193878  
Employer (CCA) SOUTH CENTRAL CORRECTIONAL FACILITY  
Address 555 FORREST AVE  
CLIFTON TENN 38425  
CITY STATE ZIP CODE

☒ INDIVIDUAL CAPACITY ☒ OFFICIAL CAPACITY

DEFENDANT NO. 7

NAME FRANK STRADA  
JOB OR TITLE COMMISSIONER TDOC  
SHIELD NUMBER N/A  
Employer TDOC  
Address 6<sup>th</sup> FL Rachel Jackson Bldg, 320 SIXTH AVE N  
NASHVILLE TENN 37243  
CITY STATE ZIP CODE

☒ INDIVIDUAL CAPACITY ☒ OFFICIAL CAPACITY

DEFENDANT NO. 8

NAME BENJAMIN F BEAN  
Job OR TITLE ASSISTANT COMMISSIONER  
SHEILD NUMBER N/A  
Employer (TDOC)  
Address 6th FL Rachel JACKSON Bldg, 320 SIXth AVE N  
NASHVILLE TENN 37243  
☒ INDIVIDUAL CAPACITY ☒ OFFICIAL CAPACITY

Defendant NO. 9

NAME Robert TURMAN  
Job or TITLE CONTRACT monitor OF OPERATIONS  
SHEILD NUMBER N/A  
Employer TDOC / SCCF  
Address 555 Forrest AVE  
CLifton TENN 38425  
☒ INDIVIDUAL CAPACITY ☒ OFFICIAL CAPACITY



N/A

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- D. Section 1983 allows defendants to be found liable only when they have acted “under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia.” 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed.

CORE CIVIC AND THESE LISTED OFFICALS HAVE VIOLATED

### III. Prisoner Status

Indicate whether you are a prisoner or other confined person as follows (*check all that apply*):

- ☐ Pretrial detainee
- ☐ Civilly committed detainee
- ☐ Immigration detainee
- ☒ Convicted and sentenced state prisoner
- ☐ Convicted and sentenced federal prisoner
- ☐ Other (*explain*) \_\_\_\_\_

### IV. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

- A. If the events giving rise to your claim arose outside an institution, describe where and when they arose.

N/A

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- B. If the events giving rise to your claim arose in an institution, describe where and when they arose.

SOUTH CENTRAL CORRECTIONAL FACILITY

IV Pg 4

SINCE BEING RELEASED FROM SEGREGATION IN NOV OF 2024, SCCF HAS STILL ALLOWED A.C.O.S. ASHLEIGH VANDYKE TO RETALIATE AND HARASS ME. THIS A.C.O.S. GOES OUT HER WAY AND JOB TITLE TO MAKE SURE I DONT GO HOME. I WAS CONVICTED OF DISCIPLINARIES AND THREATENED WITH SEGREGATION IF I WENT TO MY HEARINGS. SHE VIOLATES TDOC POLICY 502.01 BY HOLDING HEARINGS WITHOUT ME PRESENT. GRADY PERRY AND HELAN MOON WHOM ARE THE WARDEN AND ASSISTANT WARDEN ALLOW MS. VAN DYKE TO ACT OUTSIDE OF HER JOB TITLE. ROBERT TURMAN WHOM IS A TDOC OFFICAL AND OVERSEES SCCF IS SUPPOSE TO MAKE SURE THAT ALL TDOC POLICIES ARE BEING FOLLOWED AND ENFORCED. MELISSA STRAWN WHOM IS THE GRIEVANCE CHAIRPERSON WILL HOLD MY GRIEVANCE'S AND RUBBER STAMP THEM JUST SO THEY WILL BE DENIED AND NO ACTION BEING TAKEN. SINCE BEING LOCKED BACK UP IN SEGERGATION (protective custody) DUE TO THE FACILITY AND A.C.O.S. VANDYKE PUTTING MY LIFE IN DANGER WITH OTHER I/MS BY SPREADING RUMORS, SHE HAS STOPPED ME FROM SEEING THE LEGAL AID. I HAVE WRITTEN BOTH CORE-CIVIC, Tennessee Dept. OF Corrections THAT I AM IN IRREPARABLE HARM AND HAVE DIRECT PROFF. FRANK STRADA WHOM IS THE COMMISSIONER AND BENJAMIN BEAN THE ASSISTANT COMMISSIONER ARE AWARE OF ALL COMPLAINTS AND FAIL TO ACT AND ALLOW THE RETALIVATION AND NEGLIGENCE TO OCCUR.



D Pg 4

CORRECTIONS CODE OF ETHICS AND THEIR  
FACILITY STANDARDS OF POLICY 3-3BB. WARDEN  
GRADY PERRY, AWT HELEN MOON, A.C.O.S. ASHLEIGH  
VANDYKE, S/O MELISSA STRAWN OF THEIR  
OWN PERSONAL CONDUCT, RETALIATION AND FAILED  
TO REPORT SUCH OCCURRENCES.

FRANK STRADA, BENJAMIN F BEAN, ROBERT  
TURMAN AND THE TENNESSEE DEPT. OF CORRECTION  
HAS ALLOWED SOUTH CENTRAL OFFICIAL DEPRIVE  
ME OF MY RIGHT OF LIFE, LIBERTY AND PROPERTY  
DUE TO NOT INVESTIGATING SUCH CLAIMS I  
HAVE BROUGHT TO THEM BY MY FAMILY AND  
MYSELF. HAVE FILED OVER 100 GRIEVANCES SINCE  
THESE ISSUES HAVE AROSE. ALL STAFF MEMBERS  
ARE AWARE OF THE PHYSICAL, MENTAL AND FINANCIAL  
ABUSE THAT I HAVE BEEN PUT THROUGH BY  
SECT AND LISTED OFFICIALS.

- C. What date and approximate time did the events giving rise to your claim(s) occur?

DATES AND TIMES ARE DOCUMENTED AT FACILITY; LAST 3/21/25

- D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)

WRONGLY CONVICTED OF DISCIPLINARY INFRACTIONS, RETALIATION

**V. Injuries**

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

N/A

**VI. Relief**

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

I AM SEEKING DAMAGES OF MENTAL DEPRIVATION, OFFICIALS

## VI RELIEF

LISTED RESIGNATION, ALL LISTED OFFICIALS HAVE PLAYED SOME FORM OF ROLE TO RETALIATE, HARASS AND NEGLECT AGAINST ME. ALL OFFICIALS HAVE PARTICIPATED IN MYSELF HAVING TO LIVE IN FEAR OF MY LIFE DUE TO OFFICIAL MISCONDUCT AND OFFICIAL OPPRESSION. REFUSING TO ALLOW ME ACCESS TO LEGAL ASSISTANCE, FOR INCOMPATIBLES BE PLACED ON OFFICIALS LISTED.

## VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

☒ Yes

☐ No

If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

SOUTH CENTRAL CORRECTIONAL FACILITY

B. Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?

☒ Yes

☐ No

☐ Do not know

C. Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?

☒ Yes

☒ No

☐ Do not know

If yes, which claim(s)?

ALL CLAIMS, HOWEVER NO ONE WILL INVESTIGATE

- D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?

☒ Yes

☐ No

If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

☐ Yes

☐ No

- E. If you did file a grievance:

1. Where did you file the grievance?

SOUTH CENTRAL CORRECTIONAL FACILITY

2. What did you claim in your grievance?

RETALIATION, NEGLIGENCE, VIOLATION OF 14<sup>th</sup> AMENDMENT  
RIGHT, TDOC POLICY VIOLATIONS

3. What was the result, if any?

DENIED EVERYTIME I FILE, CONFLICT of Interest WITH  
CHAIR WOMAN.

4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)

GRIEVANCE chairperson Does NOT process my GRIEVANCES  
properly,



F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here:

Other Reasons, SCCF DOES NOT HAVE AN ALTERNATE GRIEVANCE CHAIR PERSON, CONFLICT OF INTEREST WITH CURRENT CHAIRPERSON.

2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:

FILED A S-1C INCIDENT STATEMENT, CORE-CIVIC OFFICIALS AND TDOC OFFICIALS

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

NO OFFICIAL AT SCCF WILL INVESTIGATE CLAIMS, FILED OVER 50 GRIEVANCE(S)  
(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)

### VIII. Previous Lawsuits

The “three strikes rule” bars a prisoner from bringing a civil action or an appeal in federal court without paying the filing fee if that prisoner has “on three or more prior occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury.” 28 U.S.C. § 1915(g).

To the best of your knowledge, have you had a case dismissed based on this “three strikes rule”?

☐ Yes

☒ No

If yes, state which court dismissed your case, when this occurred, and attach a copy of the order if possible.

N/A

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

☒ Yes

☐ No

B. If your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)

1. Parties to the previous lawsuit

Plaintiff(s) JAYSEPH RYAN GUNN # 475851

Defendant(s) CORE-CIVIL, TENNESSEE DEPT. OF CORRECTION

2. Court (if federal court, name the district; if state court, name the county and State)

MIDDLE DISTRICT

3. Docket or index number

1:24-cv-00073

4. Name of Judge assigned to your case

Judge Trauger

5. Approximate date of filing lawsuit

08/05/2024

6. Is the case still pending?

☐ Yes

☒ No

If no, give the approximate date of disposition.

2/3/25

7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

DISMISSED, NOW IN APPEALS COURT, U.S. COURT SIXTH CIRCUIT

C. Have you filed other lawsuits in state or federal court otherwise relating to the conditions of your imprisonment?

(B. Pg 9)

3.) GRADY PERRY

4.) ROBERT TURMAN

5.) ASHLEIGH VANDYKE

6.) SOUTH CENTRAL CORRECTIONAL FACILITY

7.) CIERRA PIERCE

☐ Yes

☒ No

D. If your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. *(If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)*

1. Parties to the previous lawsuit

Plaintiff(s) N/A

Defendant(s) N/A

2. Court *(if federal court, name the district; if state court, name the county and State)*

N/A

3. Docket or index number

N/A

4. Name of Judge assigned to your case

N/A

5. Approximate date of filing lawsuit

N/A

6. Is the case still pending?

☐ Yes

☐ No

If no, give the approximate date of disposition

N/A

7. What was the result of the case? *(For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)*

N/A

**IX. Certification and Closing**

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

**A. For Parties Without an Attorney**

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing:

5/29/25

Signature of Plaintiff

Gunn, Jayseph R.

Printed Name of Plaintiff

GUNN, JAYSEPH R.

Prison Identification #

00475851

Prison Address

555 FORREST AVEClifton

City

TENN

State

38425

Zip Code

**B. For Attorneys**

Date of signing:

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

City

State

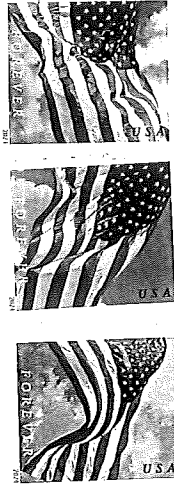
Zip Code

Telephone Number

E-mail Address



Jayseph Gunn  
# 475851  
555 Forrest Ave.  
P.O. Box 279  
Clifton Tenn  
38425



CLERK U.S. DISTRICT COURT  
MIDDLE DISTRICT OF TENNESSEE  
719 Church St. SUIT 1300  
NASHVILLE TENN 37203

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